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	Substitute for form 1449/PTO	Complete if Known			
		Application Number	10/711,813		
	INFORMATION DISCLOSURE	Filing Date	10/06/2004		
		First Named Inventor	CHARYDCZAK, Patryk		
	STATEMENT BY APPLICANT	Art Unit	<u>248</u>		
(Use as many sheets as necessary)		Examiner Name			
	Sheet 1 of 1	Attorney Docket Number	LHUD-00601-UUS	J	

			U. S. PATENT D	OCUMENTS	
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (\$ known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
	Country Code ³ Number ⁴ Kind Code ⁵ (<i>if known</i>)	MM-DD-YYYY		Or Relevant Figures Appear	T ⁶	
	5	EP-0954173-B1	07-02-2003	Hioki		
	6	EP-1185097-A2	03-06-2002	Haneda		
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Examiner	/Dika Okeke/	Date	00/40/000
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